ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	1/16/01
FORMALITY REVIEW	TH	753	02-05-01
RESPONSE FORMALITY REVIEW	JK	835	02/29/01

INDEX OF CLAIMS

✓	...... Rejected		N	......	Non-elected
=	...... Allowed		I	......	Interference
—	(Through numeral)... Canceled		A	......	Appeal
÷	...... Restricted		O	......	Objected

Claim Final	Original	Date											Claim Final	Original	Date								Claim Final	Original	Date						
	1	✓	✓	✓	✓	✓						51	✓						101								
	2	✓	✓	✓	✓							52	✓						102								
	3	✓	✓	✓	✓							53							103								
	4	✓	✓	✓	✓							54							104								
	5	✓	✓	✓	✓							55							105								
	6	✓	✓	✓	✓							56							106								
	7	✓	✓	✓	✓							57							107								
	8	✓	✓	✓	✓							58							108								
	9	✓	✓	✓	✓							59							109								
	10	✓	✓	✓	✓							60							110								
	11	✓	✓	✓								61							111								
	12	✓	✓	✓	✓							62							112								
	13	✓	✓	✓	✓							63							113								
	14	✓	✓									64							114								
	15	✓	✓	✓	✓							65							115								
	16	✓	✓	✓	✓							66							116								
	17	✓	✓	✓	✓							67							117								
	18	✓	✓	✓								68							118								
	19	✓	✓	✓	✓							69							119								
	20	✓	✓	✓								70							120								
	21	✓	✓	✓								71							121								
	22	✓	✓	✓	✓							72							122								
	23	✓	✓	✓	✓							73							123								
	24	✓	✓	✓	✓							74							124								
	25	✓	✓	✓	✓							75							125								
	26	✓	✓	✓								76							126								
	27	✓	✓	✓								77							127								
	28	✓	✓	✓								78							128								
	29	✓	✓	✓	✓							79							129								
	30	✓	✓	✓	✓							80							130								
	31											81							131								
	32	✓	✓	✓	✓							82							132								
	33	✓	✓	✓								83							133								
	34	✓	✓	✓								84							134								
	35	✓	✓	✓								85							135								
	36	✓	✓	✓								86							136								
	37	0	0	0	✓							87							137								
	38	0	0	0	✓							88							138								
	39	0	0	0	✓							89							139								
	40	✓	✓	✓								90							140								
	41	✓	✓	✓								91							141								
	42	✓	✓	✓								92							142								
	43	✓	✓	✓								93							143								
	44	✓	✓	✓								94							144								
	45	✓	✓	✓								95							145								
	46											96							146								
	47											97							147								
	48											98							148								
	49				✓							99							149								
	50				✓							100							150								

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)